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| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br><i>Only for new nonprovisional applications under<br/>37 C.F.R. § 1.53(b)</i> | Attorney Docket No.               | A-8764   |
|  | First Inventor or Application No. | ANDERSON ET AL.  |
|  | Title                             | SYSTEMS AND METHODS FOR SWITCHING TO A<br>BACK-UP POWER SUPPLY |
|  | Express Mail Label No.            | EL871766154US  |

U.S. PTO  
00727  
10/690946



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|--|-----------|---|--|------|--|--|--|---------|--|--|--|------|-------|----------|--|---------|-----------|-----|--|
| <b>APPLICATION ELEMENTS</b><br>See MPEP chapter 600 concerning utility patent application contents   |           | <b>ADDRESS TO:</b> Mail Stop Patent Application<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450   |  |      |  |  |  |         |  |  |  |      |       |          |  |         |           |     |  |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g. PTO/SB/17)<br>(Submit an original and duplicate for fee processing)<br>2. <input checked="" type="checkbox"/> Specification [Total Pages <u>13</u> ]   |           | 5. <input type="checkbox"/> Microfiche Computer Program (Appendix)<br>6. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission<br>(e.g. PTO/SB/17)<br>a. <input type="checkbox"/> Computer Readable Copy<br>b. <input type="checkbox"/> Paper Copy (identical to computer copy)<br>c. <input type="checkbox"/> Statement verifying identity of above copies   |  |      |  |  |  |         |  |  |  |      |       |          |  |         |           |     |  |
| 3. <input checked="" type="checkbox"/> Drawings (35 U.S.C. § 113) [Total Sheets <u>8</u> ]<br>4. Oath or Declaration [Total Pages <u>3</u> ]<br>a. <input checked="" type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d))<br>(for continuation/divisional with Box 16 completed)<br>i. <input type="checkbox"/> <b>DELETION OF INVENTORS</b><br>Signed statement attached deleting inventor(s)<br>named in the prior application, see<br>37 C.F.R. §§ 1.63(d)(2) and 1.33(b) |           | <b>ACCOMPANYING APPLICATION PARTS</b><br>7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of<br>(when there is an assignee) Attorney<br>9. <input type="checkbox"/> English Translation Document (if applicable)<br>10. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS<br>Statement (IDS)/PTO-1449 Citations<br>11. <input type="checkbox"/> Preliminary Amendment<br>12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br>(Should be specifically itemized)<br>13. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application,<br>Statement(s) Status still proper and desired<br>14. <input type="checkbox"/> Certified Copy of Priority Document(s)<br>(if foreign priority is claimed)<br>15. <input type="checkbox"/> Other: |  |      |  |  |  |         |  |  |  |      |       |          |  |         |           |     |  |
| 16. <input type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box, and supply the information below and in a preliminary amendment:<br><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No:<br>Prior application information: Examiner: Group Art Unit:  |           |   |  |      |  |  |  |         |  |  |  |      |       |          |  |         |           |     |  |
| <b>17. CORRESPONDENCE ADDRESS</b><br><input checked="" type="checkbox"/> Customer Number or Bar Code <b>05642</b> or <input type="checkbox"/> Correspondence address below   |           |   |  |      |  |  |  |         |  |  |  |      |       |          |  |         |           |     |  |
| <table border="1"> <tr> <td>Name</td> <td colspan="3"></td> </tr> <tr> <td>Address</td> <td colspan="3"></td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> <td></td> </tr> <tr> <td>Country</td> <td>Telephone</td> <td>Fax</td> <td></td> </tr> </table>   |           |   |  | Name |  |  |  | Address |  |  |  | City | State | Zip Code |  | Country | Telephone | Fax |  |
| Name   |           |   |  |      |  |  |  |         |  |  |  |      |       |          |  |         |           |     |  |
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|                   |                      |                                   |                  |
|-------------------|----------------------|-----------------------------------|------------------|
| Name (Print/type) | SHELLEY L. COUTURIER | Registration No. (Attorney/Agent) | 47,503           |
| Signature         | <i>S. Couturier</i>  | Date                              | OCTOBER 22, 2003 |

Docket No.: A-8764

UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: ANDERSON ET AL.  
DOCKET NO.: A-8764  
TITLE: SYSTEMS AND METHODS FOR SWITCHING TO A BACK-UP  
POWER SUPPLY

OCTOBER 22, 2003

**FEE TRANSMITTAL FORM**

Mail Stop PATENT APPLICATION  
Commissioner for Patents  
P.O.Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

The Commissioner is hereby authorized to charge the indicated fees and any additional fees and to credit any overpayments to Deposit Account No. 19-0761

The fee is calculated as shown below.

|                           | No. of Claims<br>Filed | No. of Claims<br>Paid For | No. of Extra<br>Claims | Rate     | Fee      |
|---------------------------|------------------------|---------------------------|------------------------|----------|----------|
| Independent Claims        | 5                      | 3                         | 2                      | \$ 86.00 | \$172.00 |
| Total Claims              | 20                     | 20                        | 0                      | \$ 18.00 | \$000.00 |
| Multiple Dependent Claims |                        |                           |                        | \$290.00 | \$000.00 |
| Basic Filing Fee          |                        |                           |                        | \$770.00 | \$770.00 |
| Total Filing Fee          |                        |                           |                        |          | \$942.00 |

One duplicate original of this sheet is enclosed.

**SEND CORRESPONDENCE TO:**

Scientific-Atlanta, Inc.  
Intellectual Property Dept. MS 4.3.510  
5030 Sugarloaf Parkway  
Lawrenceville GA 30044

By:



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**Certificate of Mailing**

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I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as EXPRESS MAIL in an envelope addressed to:

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on OCTOBER 22, 2003.

  
Maryellen Licker

Docket No.: A-8764